

Effective on 12/06/2004. FEE TRANSMITTAL For FY 2009		Complete if Known Application Number 10/589,969-Conf. #2360 Filing Date August 18, 2006 First Named Inventor Haruyasu Yamaguchi Examiner Name D. E. Kolker Art Unit 1649 Attorney Docket No. 20555/0207384-USO	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	735.00	

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	
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FEE CALCULATION

		FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
Application Type	Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		

		2. EXCESS CLAIM FEES		Fees Paid (\$)
Fee Description	Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	
Each claim over 20 (including Reissues)			52	26
Each independent claim over 3 (including Reissues)			220	110
Multiple dependent claims			390	195
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	
- 20 or HP	x	=		
HP = highest number of total claims paid for, if greater than 20.				
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	
- 3 or HP	x	=		
HP = highest number of independent claims paid for, if greater than 3.				

		3. APPLICATION SIZE FEE		Fees Paid (\$)
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	
- 100 =	/50 =	(round up to a whole number) x		

		4. OTHER FEE(S)		Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)				
Other (e.g., late filing surcharge): 2253 Extension for response within third month			555.00	
1806 Submission of an Information Disclosure Statement			180.00	

SUBMITTED BY			
Signature	/Mitchell Bernstein/	Registration No. (Attorney/Agent)	46,550
Name (Print/Type)	Mitchell Bernstein	Telephone	(212) 527-7700
		Date	July 28, 2009